SC12878TP Attorney Docket No .: Bing Lu et al. First Inventor: METHOD FOR FABRICATING A MASK USING A HARDMASK UTILITY AND METHOD FOR MAKING A SEMICONDUCTOR DEVICE PATENT APPLICATION Title: USING THE SAME TRANSMITTAL EV182700906US Express Mail Label No.: (Only for new nonprovisional applications under 37 CFR 1.53(b)) APPLICATION ELEMENTS Mail Stop Patent Application Commissioner for Patents ADDRESS TO: (see MPEP chapter 600 concerning P. O. Box 1450 utility patent application contents) Alexandria, VA 22313-1450 CD-ROM or CD-R in duplicate, large 7. Fee Transmittal Form in duplicate table or Computer Program (Appendix) 1. (Submit an original and a duplicate for fee processing) Nucleotide and/or Amino Acid Sequence 8. Applicant claims small entity status 2. (if applicable, all necessary) See 37 CFR 1.27 Computer Readable Form (CFR) Total Pages 3. X Specification Specification Sequence Listing on: (preferred arrangement set forth below) b. CD-ROM or CD-4 (2 copies); i. -Descriptive title of the invention ii. or paper -Cross Reference to Related Applications Statements verifying identity of above copies -Statement Regarding Fed sponsored R&D ACCOMPANYING APPLICATION PARTS -Reference to sequence listing, a table, Assignment Papers (cover sheet & document(s)) 9. -Background of the Invention -Brief Summary of the Invention 37 CFR 3.73(b) Power of Attorney 10. -Brief Description of the Drawings (if filed Statement (when there is an assignee) -Detailed Description English Translation Document (if applicable) 11. -Claim(s) -Abstract of the Disclosure 12. IDS, χ PTO/SB/ Copies of IDS Citations 08 & Preliminary Amendment **Total Sheets** 4 13. X Drawing(s) Return Receipt Postcard (MPEP 503) X 14. 5. Oath or Declaration X | Newly executed (original or copy) 15. Certified Copy of Priority Document Nonpublication Request under 35 U.S.C. 16. Copy from a prior application (37 122(b)(2)(B)(i). Applicant must attach form CFR 1.63(d)) (for continuation/ divisional with PTO/SB/35 or its equivalent. Box 18 completed) DELETION OF INVENTOR(S) 17. Other: Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet under 37 CFR 1.76 6. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: 18. Prior Appl. No. Continuation-in- Part (CIP) Divisional Continuation Group/Art Unit: Examiner: Prior Appl. information: the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS 23125 Correspondence address below Customer Number Kim-Marie Vo Name Motorola, Inc. - Law Department 7700 W. Parmer Lane Address 78729 Zip Code Texas State Austin City Fax U.S.A. Telephone Country 50,714 Registration No. Name Kim-Marie V Date **SIGNATURE**

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FEE	Application Number						32 PTO	
TRANSMITTAL							ν .	
Patent fees are subject to annual revision	Filing Date						ٽ ز-	
<u> </u>	First Named Inventor		Bing I	Lu			8	ì
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name						39	
	Group Art Unit	:					0	. =
TOTAL AMOUNT OF PAYMENT (\$) 790	Attorney Dock	et No.	SC12	878TP				
METHOD OF PAYMENT (check all that apply					CALC	CULATION (continued)		
Check Credit card Money Order Other	None	3. ADDI	TIONAL	. FEES				
X Motorola, Inc. Deposit Account:		Large Entity		Sm: <u>Enti</u>				ŀ
Motorola, Inc. Deposit Account Number 502117		Fee	Fee	Fee	Fee			
Deposit Account Name Motorola, Inc.		Code	(\$)	Code	(\$)	Fee Description		- 1
The Director is authorized to: (check all that apply)		1051	130	2051	65	Surcharge - late filing fee or oath	[¬ l
X Charge fee(s) indicated below X Credit any ov	erpayments	1052	50	2052	25	Surcharge - late Provisional filing]
		1053	130	1053	130	Non-English specification		_
X Charge any additional fee(s) during the pendency of this app	olication	1812	2520	1812	2520	For filing a request for ex parte Reexamination		╛╽
Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.		1804	920*	1804	920°	Requesting publication of SIR prior to Examiner action	-	-
		1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action		7
FEE CALCULATION		1251	110	2251	55	Extension for reply within first month		그 1
		1252	410	2252	205	Extension for reply within second month		i
		1253	930	2253	465	Extension for reply within third month		41
1. BASIC FILING FEE		1254	1450	2254	725	Extension for reply within fourth month	<u> </u>	4
		1255	1970	2255	985	Extension for reply within fifth month	Ĺ	
Large Entity Small Entity		1401	320	2401	160	Notice of Appeal	<u> </u>	-
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1001 750 2001 375 Utility filing fee 75 1002 330 2002 165 Design filing fee	0	1452	1300	2452	650	Petition to revive – unintentional		-
1002 530 2002 103 Design liming fee		1501	1300	2501	650	Utility issue fee (or reissue)	<u> </u>	ન
1004 750 2004 375 Reissue filing fee		1502	470	2502	235	Design issue fee		7 1
1005 160 2005 80 Provisional filing fee		1503	630	2503	315	Plant issue fee		
		1460	130	1460	130	Petitions to the Commissioner		- 1
SUBTOTAL (1) (\$) 750		1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	<u> </u>	-
2. EXTRA CLAIM FEES		1806	180	1806	180	Submission of IDS	<u> </u>	<u> </u>
Previously Extra Fee from Paid** Claims below	Fee Paid	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	4	0
Total Claims 20 - 20 = 0 X 18	= 0	1809	750	2809	375	Filing a submission after final		
Independent Claims 3 - 3 = 0 X 84	= 0					rejection (37 CFR § 1.129(a))	_	_ l
Multiple Dependent 280	=	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	L	
Large Entity Small Entity Fee Fee Fee Fee		1801	750	2801	375	Request for Continued Examination (RCE)		$\supset \mid$
Code (\$) Code (\$) Fee Description	n	1802	900	1802	900	Request for expedited examination		
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3		Other fee	(specify)			of a design application		
1203 280 2203 140 Multiple dependent claim, if not paid			(-F11)					
1204 84 2204 42 * Reissue independent claims over	original patent							
1205 18 2205 9 *Reissue claims in excess of 20 and over original patent		<u> </u>						
SUBTOTAL (2) (\$) 0 **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.		* Reduce	ed by Ba	sic Filing	Fee paid	SUBTOTAL (3) (\$) 40		
*For Reissues, see above								
SUBMITTED BY						Complete (if applicable)		
Name (Print/Type) Kim-Marie Vo			tion No.	50,714	4	Telephone (512) 9	96-6839	
Signature KM-MarColb Date &A. 22,233								